



Membership Form

Return By: June 1

To Join:

- Online at <http://mcgregorbayassociation.ca/>

Payment Options:

1. PayPal
 2. Interac e-Transfer (using Canadian bank accounts only). E-mail payment to: mbamemberships@gmail.com
- Cheque & Membership Form - Send cheque payable to "McGregor Bay Association" and your completed form to:

Anne Harvey, MBA Membership Secretary
1206-22 Jackson St. W.
Hamilton, ON L8P 4S5 Canada

Part 1: Membership Dues & Contributions

Select ☒ for each membership you're registering (all that apply) and list amount due.

- | | | |
|--|--------------|-----------------|
| ☐ Regular Membership voting member, (<i>one per property</i>) | @ \$150.00 | \$ _____ |
| ☐ Extended Family Membership no. _____* | @ \$35.00/ea | \$ _____ |
| <small>*An Extended Family Membership is a non-voting membership for individuals associated with a Regular Member who want membership benefits (i.e. Newsletter, participation in MBA events).</small> | | |
| ☐ Business Membership | @ \$90.00 | \$ _____ |
| ☐ Friend of the Bay (non-property owner with interest in the Bay) | @ \$50.00 | \$ _____ |
| ☐ Additional contribution for general use by the McGregor Bay Association | | \$ _____ |
| | Total | \$ _____ |

Part 2: Regular Member Information (Please print legibly)

Name: _____ E-mail: _____

For businesses, please indicate business name and contact name.

Co-owner Name: _____ E-mail: _____

Address: _____ City: _____

Province/State: _____ Postal/Zip Code: _____ Home phone: _____

McGregor Bay phone (only list one) _____

For businesses, please list business phone and contact.

Property Description: (Island #, Lot # or other) _____ GPS coordinates: _____

MBA Membership Name: _____

Part 3: Extended Memberships

List extended family members to be registered.

Name: _____

E-mail: _____

Address: _____

City: _____

Province/State: _____ Postal/Zip Code: _____

Home phone: _____

McGregor Bay phone: _____

Name: _____

E-mail: _____

Address: _____

City: _____

Province/State: _____ Postal/Zip Code: _____

Home phone: _____

McGregor Bay phone: _____

Name: _____

E-mail: _____

Address: _____

City: _____

Province/State: _____ Postal/Zip Code: _____

Home phone: _____

McGregor phone: _____

Name: _____

E-mail: _____

Address: _____

City: _____

Province/State: _____ Postal/Zip Code: _____

Home phone: _____

McGregor phone: _____

Part 4: Preferences & Volunteering (Volunteers Needed!!)

1) ☐ Check ☒ if you prefer to receive only emailed electronic copies of the newsletter.

2) I want to volunteer to help with (check ☒ all interested areas):

☐ Membership Recruitment

☐ Fire Protection

☐ Social Activities (e.g., picnic)

☐ Newsletter

☐ Other: _____

3) Priorities for McGregor Bay Association should be: _____

4) Other comments: _____